Income Tax Division 7619 Memphis Avenue Brooklyn, OH 44144-2197 (216) 351-2133 (216) 635-4211 Fax

2005 CITY OF BROOKLYN

FISCAL INCOME TAX RETURN MANDATORY FILING

our Social Security
umber or Federal I.D.
pouse's Social
ecurity Number

I authorize the Brooklyn Income Tax Division to discuss my account and enclosures with my preparer (above)

www.brocklynonio.gov	APRIL 17, 2006
Our tax records indicate a tax return was not filed for the following years:	If filling a zero income return provide reason:
	g a zoro moonio rotarri provido rotaori:
	RECENT MOVE DATE:/
	☐ From Brooklyn ☐ To Brooklyn
	Previous or New Address (circle one)
	City, State, Zip
	Note: If your total income is reported on W-2 wages and local tax was correctly withheld at the
	rate of 2.0%, complete the shaded areas only, sign return at the bottom and attach the W-2 forms. All others, see instructions and complete form in its entirety.
Work Phone () Home Phone ()	
If you have previously filed a Brooklyn Tax Return under a different name, INCOME	, please indicate former name:
Wages and salaries (Required: Attach W-2 and/or 1099 forms and complete the complete that the complete the complete that the complete	lete Worksheet Table on back of return\
Other Taxable Income	icte Horisheet rable on back of retain)
2a. Business Income (attach schedule[s])% allocable to Brookl	dyn 2a
2b. Rental or Supplemental Income (attach Schedule E)	2b
2c. Other income (please provide documentation)	20
2d. Loss carried forward from previous years (include schedule)	2d
3. Total other taxable income (add lines 2a, 2b, 2c, subtract line 2d; if amount is less that	
4. Total taxable income before deductions (add lines 1 and 3)	4
Deductions (from line 32 on back of this return)	5
6. Brooklyn taxable income (subtract line 5 from line 4)	6
TAX AND CREDITS	
7. Brooklyn tax due before credits (multiply line 6 by 2.0%)	7
8. Refunds or credits received in 2005 from other localities (individuals only)	8
9. Current year tax due before credits (add lines 7 and 8)	9
10. Taxes withheld and paid to Brooklyn (total of column 2 from Worksheet Table)	10
11. Taxes withheld and paid to other localities (total of column 3 from Worksheet Table	
12a. 2005 estimated tax payments made to BrooklynAs of 12/31/05 \$_	
12b. 2005 estimated tax payments made to BrooklynAfter above date \$_	
13. Income tax credit carried forward from prior years	13
14. Total credits (add lines 10, 11, 12 and 13)	14
15. If difference between line 9 and line 14 is less than \$1.00, enter zero and	
REFUND	<u> </u>
16. If line 14 is greater than line 9, and not less than \$1.00, enter the difference	ence, which is amount of overpayment
17. Amount of line 16 to be credited to 2006 estimated tax liability (enter here are	
18. Amount to be refunded (subtract line 17 from line 16) Proceed to line 21 (no refu	·
AMOUNT PAYABLE TO CITY	
19. If line 9 is greater than line 14 , and not less than \$1.00, enter the difference	ence, which is the balance due for 2005
20. Penalty and Interest (from line 36 on back of return)	20
DECLARATION OF 2006 PERSONAL OR BUSINESS ESTIMATED INCOME	
21. Estimated taxable income for 2006 tax year	21
22. Estimated tax due (multiply line 21 by 2.0%)	22
23. Taxes to be withheld and paid to Brooklyn and other localities	23
24. Estimated tax due for 2006 tax year (subtract line 23 from line 22)	24
25. First quarter of estimated tax payable to City (multiply line 24 by 25%)	25
26. 2005 credit applied to 2006 estimated tax payments (line 17)	26
27. Net amount due for initial quarterly payment (subtract line 26 from line 25)	27
28. Total amount due by April 17, 2006 (add lines 19, 20 and 27) Make check pay	
The undersigned declares this to be a true, correct, and complete return of Brooklyn Income Tax for	
Signature	Date / / For Departmental Use
Spouse's Signature	Date / /
Tax Preparer's Signature	Phone #
(If other than taxpayer)	Date / / () -

Attach W-2s, taxable 1099s and copies of applicable federal forms and schedules here

a Control number Copy for State, City or Local Tax Department								
b Employer identification number		1	Wages, tips, other compensation 50,000.00	'				
c Employer's name, address, and ZIP code		3	Social security wages 55,000.00	4 Social security tax withheld 3,410.00				
		5	Medicare wages and tips 55,000.00	6 Medicare tax withheld 797.50				
	(9)	7	Social security tips	8 Allocated tips				
d Employee's social security number e Employee's name, address, av			Advance EIC payment	10 Dependent care	10 Dependent care benefits			
			Nonqualified plans	12a				
CETTING.		13	Statutory Retirement Third-party amployee plan sick pay	12b				
		14	Other	12c				
				12d				
			1					
15 State Employer's state ID nur	16 State wages, tips, etc. 55,000.00	17 State income tax 1,750.00	18 Local wages, tips, etc. 55,000.00	19 Local income tax 1,100.00	20 Locality name BROOKLYN			

The arrow indicates the box in which local income tax withheld will be located on your W-2.

(Box 19)

	KSHEET TA								
Number of W-2 and 1099 Misc. forms attached:			COLUMN 1	COLUMN 2	COLUMN 3				
earned	wages were (Month/Day)		Locality Where	Gross Income (Box 5	Brooklyn Tax	Tax Paid to Other Localities (not to exceed			
From	То	Print Employer's Name	Employed	on W-2)	Withheld	2% of gross income)			
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/_	/								
/_	/								
/_	/								
	\$								
				(to page 1 line 1)	(to page 1 line 10)	(to page 1 line 11)			
	CTIONS								
29. E	29								
30. N	30								
31. E	31								
32. T		32							
PENALTY AND INTEREST 33. Penalty: Failure to file a tax return by April 17, 2006 (\$25.00) 33									
34. Penalty: On unpaid taxes by due date									
	35. Interest: 35								
36. T	36. Total penalty and interest: Add lines 33, 34 and 35 (enter here and on line 20 on front of return)								